

South Carolina Department of Disabilities & Special Needs  
Pervasive Developmental Disorder (PDD) Program  
Budget for Waiver Consumers

**DATE:**  
8/21/2007

**Provider Name:** DSN Board  
**NAME:** John Doe  
**SSN #:** 123-45-6789  
**SC/EI:** \_\_\_\_\_  
**Budget Begin Date:** \_\_\_\_\_

<u>Program/Service</u>	<u>Service Unit</u>	<u>Cost per Unit</u>	<u>Budgeted Approved Total Units</u>	<u>Budgeted Approved Total Cost</u>
Case Management	Monthly	\$135.75		-
EIBI Assessment	Annual	\$2,100		-
EIBI Plan Implementation	Hour (up to 6 per month)	\$60		-
EIBI Lead Therapy	Hour (up to 6 per week)	\$30		-
EIBI Line Therapy	Hour (up to 40 per week)	\$14		-
<b>Total</b>				<u>\$ -</u>

Budgeted EIBI services units approved by: \_\_\_\_\_

**NOTE:** Maximum reimbursement for each individual is \$50,000 per year not to exceed three years. For example, if a person enrolls in the program on January 10, 2007, the \$50,000 limit will apply for each of the following time periods: 1/10/07 to 1/09/08 for the 1st year, 1/10/08 to 1/09/09 for the 2nd year, and 1/10/09 to 1/09/10 for the final year.